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UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF PENNSYLVANIA

Bibi Fathema Dowlut

Case No. 18-70651 JAD

Reporting Period: March

MONTHLY OPERATING REPORT (INDIVIDUAL WAGE EARNERS)

File with Court and submit copy to United States Trustee within 14 days after end of month

Submit copy of report to any official committee appointed in the case.

REQUIRED DOCUMENTS	Form No.	Document Attached	Explanation Attached
Schedule of Cash Receipts and Disbursements	MOR-I (INDV)	1/	
Schedule of Cash Receipts and Disbursements - continuation	MOR-1 (INDV) (CONT)	./	
Bank Reconciliation		1.	
Copies of bank statements		1/	
Cash disbursements journals			
Copies of tax returns filed during reporting period		>	
Summary of Unpaid Postpetition Debts	MOR- 4		-
	MOR-5		

I declare under penalty of perjury (28 U.S.C. Section 1746) that the documents attached to this report are true and correct to the best of my knowledge and belief.

Signature of Debtor	4/20/2020 Date
Signature of Joint Debtor	Date
Signature of Preparer	Date
Printed Name of Preparer	-

FORM MOR (INDV) (10/00) Bibi Fathema Dowlut

Case No. 18-70651 JAD

Debtor

Reporting Period:

INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. Attach the bank statements and a detailed list of all disbursementsmade during the report period that includes the date, the check number, the payce, the transaction description, and the amount. A bank reconciliation must be attached for each account.

	Current Month Actual	Cumulative Filing to Data Actual
Cash - Beginning of Month	394.34	Actual
RECEIPTS		
Wages (Net)		
Interest and Dividend Income		
Alimony and Child Support Social Security and Pension Income		
Sale of Assets		
Other Income (attach schedule)	. /	
Total Receipts		VIII - 2 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0
DISBURSEMENTS		
ORDINARY ITEMS:		T
Mortgage Payment(s)		
Rental Payment(s)		
Other Secured Note Payments		
Utilities		
Insurance		
Auto Expense		
Lease Payments IRA Contributions		
Repairs and Maintenance		
Medical Expenses		
Household Expenses		
Charitable Contributions		
Alimony and Child Support Payments		
Taxes - Real Estate		
Taxes - Personal Property		
Taxes - Other (attach schedule)		
Travel and Entertainment		
Gifts		
Other (attach schedule)		
Total Ordinary Disbursements	The second secon	
BORGANIZATION ITEMS:		
Professional Fees		
U. S. Trustee Fees		
Other Reorganization Expenses (attach schedule)		
Total Reorganization Items		
otal Disbursements (Ordinary + Reorganization)		
t Cash Flow (Total Receipts - Total Disbursements)		
sh - End of Month (Must equal reconciled bank statement)	39434	
The state of the s	014.24	

FORM MOR-I(INDV)

(9/99)

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Bibi Fathema Dowlut

Document

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Debtor

Reporting Period: Mach, 2020

INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS - continuation sheet

BREAKDOWN OF "OTHER" CATEGORY	Current Month Actual	Cumulative Filing to Date Actual
Other Income		
1	- 10	
Other Taxes		
ther Ordinary Disbursements		
	0	
her Reorganization Expenses		
	0	

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Debtor

Reporting Period:

STATUS OF POSTPETITION TAXES

The beginning tax liability should be the ending liability from the prior month or, if this is the first report, the amount should be zero Attach photocopies of IRS Form 6123 or payment receipt to verify payment or deposit of federal payroll taxes. Attach photocopies of any tax returns filed during the reporting period.

TOTAL TOTAL SET PLAN (P. P. P		Amount Withheld or Accrused	Amount Paid	Date Paid	Check No.	Ending & Tax Liability
Federal				1 Haristy and		- Add Other
Withholding					William A State of	
FICA-Employee		/				-
FICA-Employer		,				
Unemployment		0				
Income						
Other:						
Total Federal Taxes					-	
State and Local		ார் வி. அன்ற அத்திழ	w en .4	4.A		Mean and the con-
Withholding		-	-			
Sales						
Excise						
Unemployment						
Real Property						
Personal Property						
Other:						
Total State and Local						
Fotal Taxes	and a make the same					-

SUMMARY OF UNPAID POSTPETITION DEBTS

Attach aged listing of accounts payable.

		Number of Days Past Due			7. 77	
	Current	0-30	31-60	61-90	Over 90	Total
Accounts Payable	1		THE PERSON NAMED IN		315.50	TOMI.
Wages Payable				-		
Taxes Payable						
Rent/Leases-Building						
Rent/Leases-Equipment		0				
Secured Debt/Adequate Protection Payments	/					
Professional Fees						
Amounts Due to Insiders*						
Other:						
Other:						
Total Postpetition Debts				-	THE RESERVE OF THE PERSON NAMED IN COLUMN	

Explain how and when the Debtor intends to pay any past-due postpetition debt	5.
*"Insider" is defined in 11 U.S.C. Section 101(31).	FORM MORA

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Case No. 18-70651 JAD

Debtor :

Reporting Period: 1

ACCOUNTS RECEIVABLE RECONCILIATION AND AGING

Accounts Receivable Reconciliation	Athount
Total Accounts Receivable at the beginning of the reporting period	
+ Amounts billed during the period	
- Amounts collected during the period	
Total Accounts Receivable at the end of the reporting period	
Accounts Receivable Aging	Amount -
0 - 30 days old	PARIOURIES . A. J. Miles
31 - 60 days old	
61 - 90 days old	
91+ days old .	
Total Accounts Receivable	
Amount considered uncollectible (Bad Debt)	
Accounts Réceivable (Net)	

DEBTOR QUESTIONNAIRE

Must be completed each month	Yes	No
Have any assets been sold or transferred outside the normal course of business this reporting period? If yes, provide an explanation below:		X
2. Have any funds been disbursed from any account other than a debtor in possession account this reporting period? If yes, provide an explanation below.	X	
. Have all postpetition tax returns been timely filed? If no, provide an explanation below.	X	
i. Are workers compensation, general liability and other necessary insurance coverages in effect? If no, provide an explanation below.	×	
	,	
	/	



Last statement: February 28, 2020 This statement: March 31, 2020 Total days in statement period: 32

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FATHEMA DOWLUT DEBTOR IN POSSESSION CASE NUMBER 18-70651-JAD 365 OAK KNOLL RD HOLLIDAYSBURG PA 16648-2613

Select Banking

3004211276 Account number Low balance \$394.34 Average balance \$394.34 Avg collected balance \$394

DAILY ACTIVITY

	•			
Date	Description	Additions	Subtractions	Balance
02-28	Beginning balance			\$394.34
03-31	Ending totals	.00	.00	\$394.34

** No activity this statement period **

OVERDRAFT/RETURN ITEM FEES

	Total for this period	Total year-to-date
Total Overdraft Fees	\$0.00	\$0.00
Total Returned Item Fees	\$0.00	\$0.00

